



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents and/or fees referred to as attached therein are being deposited with the United States Postal Service on NOV 10, 2003 in an envelope as First Class Mail, addressed to Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Pat Tate

Attorney Docket No.: ELECP014

First Named Inventor: AHMAD, et al

Application Number: 09/371,462

Filing Date: August 1, 1999

Group Art Unit: 3621

Examiner: Daniel L. Greene

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114

a. ☐ Previously submitted:

☐ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on _____

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

☐ Other _____

b. Enclosed:

- ☒ Amendment/Reply
☐ Affidavit(s)/Declaration(s)
☐ Information Disclosure Statement (IDS)
☐ Other

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c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.


| Claims Remaining After Amendment | Highest Previously Paid For | Present Extra | SMALL ENTITY RATE FEE | OR | LARGE ENTITY RATE FEE |
|---|-----------------------------------|------------------|--------------------------|----|--------------------------|
| TOTAL CLAIMS <u>26</u> - | <u>27</u> | <u>0</u> | X9 = \$ | OR | X18 = \$ |
| INDEP CLAIMS <u>4</u> - | <u>4</u> | <u>0</u> | X42 = \$ | OR | X84 = \$ |
| [] Multiple Dependent Claim Present and Fee Not Previously Paid | | | \$140 | | \$280 |
| TOTAL | | | \$ | | \$ 0 |

2. Miscellaneous:

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months.
- b. ☐ Other _____
3. ☒ Applicant hereby petitions for a one month extension of time.
4. ☒ Applicant(s) hereby petition that any additional required extension of time be granted.
5. ☒ Enclosed is our Check No. 1049 in the amount of \$880.00 to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.
6. ☐ Please charge Deposit Account No. 50-0685 () in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
7. ☒ If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (ELECP014).
8. ☒ Please continue to send correspondence to the following address:

CUSTOMER NO. 21912
VAN PELT & YI LLP
10050 N. Foothill Blvd., Ste. 200
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Date: 11/10/03



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